



Cumberland District Public Health Council
Full Council Meeting
January 17th, 2020
Northern Light Home Care and Hospice
50 Foden Rd., South Portland, ME

Present: Dana Baldwin, Mohamud Barre, Cathy Bean, Liz Blackwell-Moore, Joseph Chappell, Karen Deehy, Colleen Donlan, Janet Dosseva, Stephanie Eglinton, Ellen Freedman, Kirsten Goodrich, Elizabeth Jackson, Kristine Jenkins, Ron Jones, Courtney Kennedy, Sarah Lewis, Chelsea Mancini, Jemma Penberthy, Hayley Prevatt, Barbara Price, Josh Pobrislo, Bridget Rauscher, Naomi Schucker, Jen Shumway, Emer Smith, Erica Swan, Carl Toney, Helen Twombly, and Emilee Winn.

Called In: Meaghan Chemelski, Rachel Gallo, Maggie Gamble, Caity Hager, Amanda Hutchins, Kristina Kalolo, Kate Perkins, Cathy Pinkham, and Heather Pond

The Next Council Meeting will be held on March 20th, 2020 at 10am. Location TBD.

Topic	Discussion	Notes/Actions
Member and	CDPHC Election Results:	Actions: Member seats are still
Officer Election –	Cathy Bean - CDPHC Chair	open, as well as the Advocacy Co-
Overview and	Carl Toney - CDPHC Vice Chair	Chair position within the
Results	Newly-elected CDPHC Members - Abdullahi Ali (Gateway Community Services), Joseph Chappell (Cumberland County Emergency Management), Ellen Freedman (MaineHealth), Maggie Gamble (United Way), Elizabeth Jackson (Greater Portland Health), Inza Ouattara (Catholic Charities), Cathy Pinkham (Local Health Officer, Bridgton and Harrison), Josh Pobrislo (Local Health Officer, South Portland), Barb Price (Consumers for Affordable Healthcare), and Helen Twombly (Local Health Officer, Sebago)	Executive Committee. For more information or to nominate please contact Kristine at: Kristine.L.Jenkins@Maine.gov
Treasurer's Report	Reported out that after working with Consultant Chioma Nnaji, the CDPHC currently has discretionary funding of \$11,752.76 remaining from the \$23,838 that was carried over.	
MCA's Vision, Advocacy and	Relating to the CDPHC's focus around Youth Mental Health and ACEs, Stephanie Eglinton of Maine Children's Alliance (MCA) shared information and links around the	Notes: *See presentation for more information and links.

Topic	Discussion	Notes/Actions
Update on the	work they are doing, including their efforts around the 2020 U.S. Census. Stephanie	For more information visit:
Children's Cabinet:	shared MCA's mission, priorities, and the lens she uses to keep focus on the work they	www.mekids.org/
Stephanie Eglinton,	do. MCA has a deep focus on data – and if there are any questions regarding data, feel	
Executive Director of Maine Children's	free to reach out and use MCA as a resource.	Maine KIDS COUNT Databook PDF:
Alliance	Two areas that MCA is currently focused on includes First4ME and the 2020 Census.	www.mekids.org/site/assets/files/
	Stephanie spent time discussing why these areas are important to the well-being of	1241/kidscount 2019.pdf
	children and is looking for the Council's support around messaging.	
		First4ME, LD1760 information:
	Discussions and questions included targeting under represented Census areas and	www.rightfromthestartmaine.org/
	populations, and the organizations who are focused on census outreach; incarcerated	first4me/
	parents' impact on children; Maine Children's Cabinet work with older youth; childhood	
	incarceration and ACEs; and postpartum bills.	
Maine CDC: Local	Maine CDC is convening Local and State Public Health Systems Assessments (LPHSA	Actions: *See presentation for
Public Health	and SPHSA, respectively). The same nationally recognized tool that was used in 2009-10	more information.
Systems	is being used. The Assessment focuses on the 10 Essential Public Health Services and	
Assessment	standards of care. Each standard will be evaluated by a group of stakeholders over the	If interested in being involved in
Update	course of two sessions. Maine CDC is working with MCD to engage outside facilitators	the LPSHSA, email Kristine:
	who will co-facilitate sessions with a DL from another public health district.	Kristine.L.Jenkins@Maine.gov
	Cumberland Local Public Health Systems Assessment Sessions:	To view Cumberland's LPHSA
	Wednesday, March 11 th , 8am – 12pm	report from 2010:
	Wednesday, May 6 th , 8am – 12pm	www.maine.gov/dhhs/mecdc/pub
	Location/s TBD.	<u>lic-health-systems/lphd/district2/</u>
		documents/cph-cumberland-
	A local working group will be meeting to discuss outreach and participation in the	<u>lphsa-full-report.pdf</u>
	process. Everyone is welcome to participate in planning for the LPHSA sessions	
	Cumberland LPHSA Planning:	
	Tuesday, January 28 th from 12:30pm – 2pm at MaineHealth, 110 Free St. Portland, ME.	
	Conference Room MMC B. Call in # 1877-455-0244, code 9162074207	

Topic	Discussion	Notes/Actions	
	Members shared their questions and thoughts including that a benefit of these LPHSA		
	meetings in connecting partners who may not attend CDPHC; the ways we can connect		
	to other partners for invitation purposes; the agenda for these upcoming meeting		
	topics and who to invite; the role for youth in attending the meetings; and upcoming		
	planning dates. A Statewide Assessment is tentatively planned for September 2020.		
Participant	• Maine Access Immigrant Network (MAIN) is hosting a Somali Census workshop on		
Updates and	Saturday, January 25 th		
Announcements	• City of Portland is hiring a Public Health Director: www.portlandmaine.gov/1107/		
from Around the	<u>Current-Job-Opportunities</u>		
Table	• For outreach opportunities regarding exploited and trafficked youth, contact Jen at		
	JShumway@spurwink.org		
	• Food Fuels Learning is giving their quarterly report to the community on Jan 29 th from		
	5:30pm – 7pm at East End Elementary School		
	• CCEMA is focused on Hazard Mitigation and Recovery and looking for input. Those		
	interested in participating in Recovery Planning Workshops, school planning or		
	trainings, email Joe: chappell@cumberlandcounty.org		
	• The City of Portland released their Health of Portland Report:		
	www.portlandmaine.gov/DocumentCenter/View/26904/Health-of-Portland-2019-2020-		
	<u>Report</u>		
	• Consumers for Affordable Health Care has an insurance hotline: 1-800-965-7476		
	• Maine CDC shared information on the flu season, and to visit www.MaineFlu.gov for		
	surveillance reports and order posters		
	• Cumberland County Youth Policy Board is piloting a web-based Zoom series called		
	"Teen Talk" starting on January 30 th		
	• GPCOG will be sharing a toolkit for municipalities to help address opioid misuse:		
	www.gpcog.org/281/Public-Health - check back as the website will be updated		
	• MAIN shared that many students are looking for the opportunity to shadow different		
	professions. If anyone is interested, contact Sarah at: Sarah.Lewis@main1.org		

Maine Children's Alliance



Cumberland District Public Health Council

January 17, 2020

MCA MISSION

The Maine Children's Alliance is a nonpartisan nonprofit that advocates for sound public policies and promotes best practices to improve the lives of Maine's children, youth and families.

Three Questions

- What's best for children?
- What does the data say?
- How could the system be improved?

State House Bill Tracking:

https://www.mekids.org/take-action/state-house-bill-tracking/

Maine KIDS COUNT



- Part of national KIDS COUNT Network, funded by the Annie E. Casey Foundation
- Data book is ME's only comprehensive report on physical, economic and educational wellbeing of Maine children.
- Up-to-date online interactive state and county data at https://datacenter.kidscount.org/

MCA Priority Areas

1) Early Care and Education
ACES and Resiliency
ME Children's Cabinet

- 2) Health, Safety & Wellbeing
- 3) Family Economic & Food Security

FIRST4ME – LD 1760



First4ME

A Community-Based Approach to Improving Access to Quality Early Care and Education:

- CHILDREN (infant to age 4) gain access quality ECE
- EARLY EDUCATORS receive coaching and higher pay
- FAMILIES gain supports for health and well-being
- ME ECONOMY benefits from workforce participation

https://rightfromthestartmaine.org/first4me/

CENSUS 2020

MCA is Maine's Complete Count Committee for Young Children

- Why is it important that every child gets counted?
- Why do some kids not get counted?
- What YOU can do

APRIL 1 = Census Day 2020

https://mainechildrensalliance.org/priorities/census-2020/

Maine Children's Alliance



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Executive Director
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www.mekids.org

Maine Center for Disease Control and Prevention (CDC)

Local Public Health System Assessment (LPHSA) 2020 State Public Health System Assessment (SPHSA) 2020 Overview



Local Public Health System Assessment

- Collaborative Development of the National Public Health Performance Standards and the LPHSA Instrument:
- Centers for Disease Control
- American Public Health Association (APHA)
- Association of State and Territorial Health Officials (ASTHO)
- National Association of County and City Health Officials (NACCHO)
- National Association of Local Boards of Health (NALBOH)
- National Network of Public Health Institutes (NNPHI)
- Public Health Foundation (PHF)

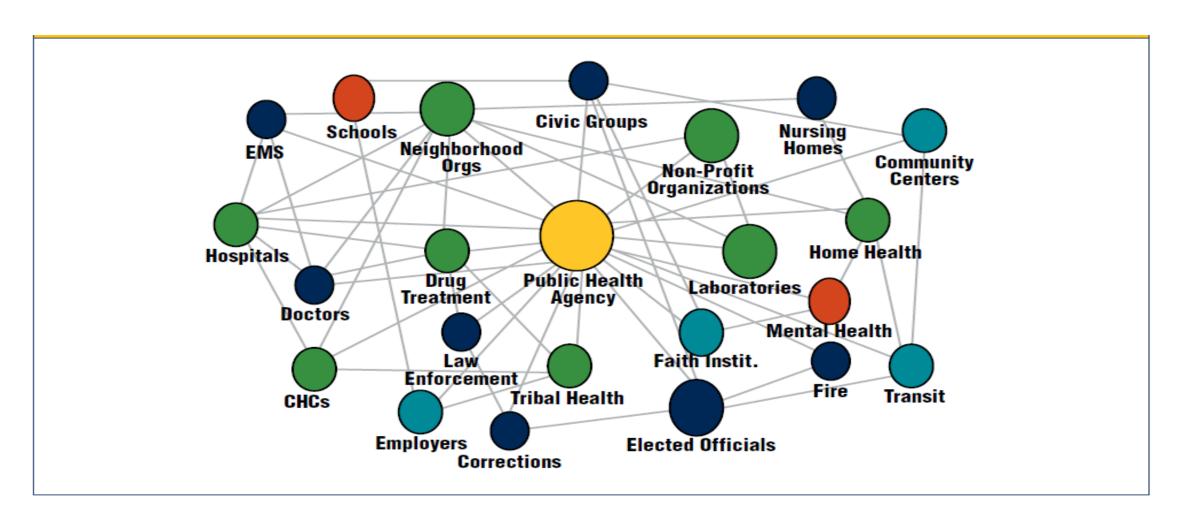
Local Public Health Assessment (LPHSA)

The Local Public Health System Assessment focuses on the local public health system or all entities that contribute to public health services within a community.

Maine CDC, in collaboration with local stakeholders, is convening LPHSAs to identify gaps and opportunities and inform a District Public Health Systems Improvement Plan (DPHSIP) to:

- Build on local partners' strengths, and to coordinate and improve the delivery of the Ten Essential Public Health Services in Maine's Public Health Districts; and,
- Improve local public health systems and infrastructure.

Our Local Public Health System





Standards:

- Are designed around the 10
 Essential Public Health Services.
 These services provide the fundamental framework describing all the public health activities that should be carried out in all states and communities.
- Focus on the overall public health system, rather than a single organization.
- Describe an optimal level of performance rather than provide minimum expectations.
- Are intended to support a process of quality

Sample-Standard 3.1

The LPHS designs and puts in place health promotion and health education activities to create environments that support health. These promotional and educational activities are coordinated throughout the LPHS to address risk and protective factors at the individual, interpersonal, community, and societal levels. The LPHS includes the community in identifying needs, setting priorities, and planning health promotional and educational activities. The LPHS plans for different reading abilities, language skills, and access to materials.

To accomplish this, members of the LPHS work together to:

- Provide policymakers, stakeholders, and the public with ongoing analyses of community health status and related recommendations for health promotion policies.
- Coordinate health promotion and health education activities at the individual, interpersonal, community, and societal levels.
- Engage the community in setting priorities, developing plans, and implementing health education and health promotion activities.

Sample-Discussion Questions

Discussion Questions for Model Standard 3.1

Involvement

- (a) How many of you provide information on community health to the general public, policymakers, and public and private stakeholders?
- (b) How do your organizations work together to plan, conduct, and implement health education and promotion activities?
- (c) How do your organizations work with others beyond your usual LPHS partners on specific health promotion activities (e.g., supermarkets and nutrition interventions)?
- (d) How do LPHS entities work with community advocates and local media outlets to publicize health promotion activities (e.g., campaigns about the public health effects of laws, media campaigns)?

Quality and Comprehensiveness

- (a) Are the health education and health promotion campaigns based on sound theory, evidence of effectiveness, and/or best practice?
- (b) How do organizations in the LPHS support healthy behavior?
- (c) How do organizations in the LPHS tailor campaigns for populations with higher risk of negative health outcomes?
- (d) How do organizations in the LPHS design campaigns to reach populations in specific settings?
- (e) How are the health education programs and health promotion campaigns evaluated?

Usability

(a) How are evaluation results used to revise and strengthen the programs?

Sample-Performance Measures

Performance Measures for Model Standard 3.1

At what level does the LPHS...

	•	rs, and the public wit r health promotion po	h ongoing analyses of olicies?	community health
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0
3.1.2 Coordinate hea	•	health education act	ivities at the individua	l, interpersonal,
No Activity	Minimal	Moderate	Significant	Optimal
0	0	•	0	•
		t the process of setti alth promotion activit	ng priorities, developii ies?	ng plans, and
No Activity	Minimal	Moderate	Significant	Optimal
0	0	0	0	0

Scoring Likert Scale

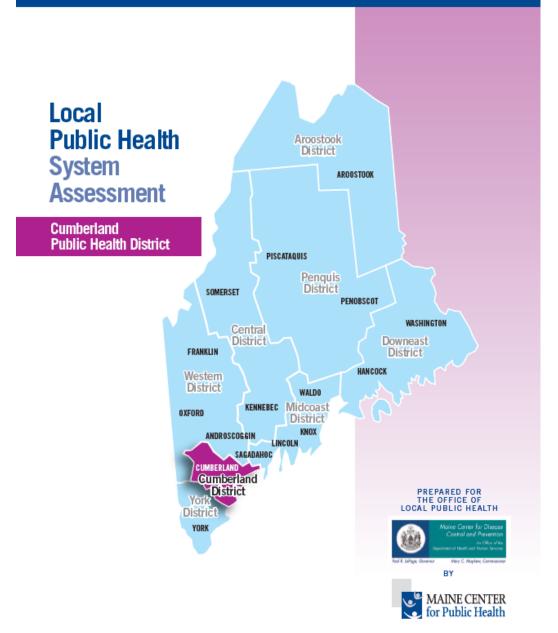
Optimal Activity (76–100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51–75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26–50%)	Greater than 25% but no more than 50% of the activity described within the question is met.
Minimal Activity (1–25%)	Greater than zero but no more than 25% of the activity described within the question is met.
No Activity (0%)	0% or absolutely no activity.

Performance Measures for Model Standard 3.1 At what level does the LPHS... 3.1.1 Provide policymakers, stakeholders, and the public with ongoing analyses of community health status and related recommendations for health promotion policies? No Activity Minimal Moderate Significant Optimal 0 0 0 3.1.2 Coordinate health promotion and health education activities at the individual, interpersonal, community, and societal levels? No Activity Minimal Moderate Significant **Optimal** 0 0 3.1.3 Engage the community throughout the process of setting priorities, developing plans, and implementing health education and health promotion activities? No Activity Minimal Moderate Significant **Optimal** 0 0

SWO-Recording

Discussion Notes for Model Standard 1.1				
Strengths	Weaknesses	Short-Term Improvement Opportunities	Long-Term Improvement Opportunities	

Cumberland LPHSA - 2010



Cumberland LPHSA 2010 Scores

Summary of Scores

EPH9	3	SCORE E	PHS	S .	SCORE
1.	Monitor Health Status to Identify Community Health Problems	37	6.	Enforce Laws and Regulations that Protect Health and Ensure Safety	40
2.	Diagnose and Investigate Health Problems and Health Hazards	55	7.	Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	29
3.	Inform, Educate, and Empower People about Health Issues	44	8	Assure a Competent Public and Personal Health Care Workforce	45
4.	Mobilize Community Partnerships to Identify and Solve Health Problems	30	9.	Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based	
5.				Health Services	36
	Support Individual and Community Health Efforts	42	10	. Research for New Insights and Innovative Solutions to Health Problems	35
Overall Performance Score 39					

Next Steps

Dates Identified for All District LPHSA Meetings

Cumberland March 11th and May 6th, 2020 8:00 am – 12:00 pm

- Continue Planning at the State and District Levels
- Familiarize Ourselves with the LPHSA

https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/local-assessment-and-governance-tools

